

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
May 15 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **545714** (8)

1. Corporation Name
MELDISCO K-M LAKE WALES, FLA., INC.

4108

Principal Place of Business

Mailing Address

**1970 ST RD 60 E
LAKE WALES FL 33853
US**

**933 MACARTHUR BLVD.
MAHWAH NJ 07430-2045**



3. Date Incorporated or Qualified
09/21/1977

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

4. FEI Number

22-2169883

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**UNITED STATES CORPORATION COMPANY
1201 HAYES ST
SUITE 105
TALLAHASSEE FL 32301**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **VST** ☐ DELETE
NAME **FALKOFF, MARTIN**
STREET ADDRESS **933 MACARTHUR BLVD.**
CITY - ST - ZIP **MAHWAH NJ**

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME **RANDALL S. PROFFITT**
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TITLE **D** ☐ DELETE
NAME **PALIZZI, ANTHONY**
STREET ADDRESS **3100 W. BIG BEAVER**
CITY - ST - ZIP **TROY MI**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE **PD** ☐ DELETE
NAME **SHEPARD, JEFFREY**
STREET ADDRESS **933 MACARTHUR BLVD.**
CITY - ST - ZIP **MAHWAH NJ**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE **AT** ☐ DELETE
NAME **WOJNO, THOMAS**
STREET ADDRESS **933 MACARTHUR BLVD.**
CITY - ST - ZIP **MAHWAH NJ**

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE **AT** ☐ DELETE
NAME **KAKAR, MANOHAR**
STREET ADDRESS **933 MACARTHUR BLVD.**
CITY - ST - ZIP **MAHWAH NJ**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE ☐ Change ☒ Addition
6.2 NAME **S MAUREEN RICHARDS**
6.3 STREET ADDRESS **933 MACARTHUR BLVD.**
6.4 CITY - ST - ZIP **MAHWAH, N.J. 07430**

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:


SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAN 9 1997

(201) 934-2000

Date

Daytime Phone #

CR2E034 (9/96)